Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for indicated the second fee address. maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

05/26/2011 37583 NAVTEQ NORTH AMERICA, LLC 425 West RANDOLPH STREET SUITE 1200, PATENT DEPT CHICAGO, IL 60606



Note: A cortificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Adil M. Musabi	(Depositor's name)
add Murdi	(Signature)
6/2/2011	(Date)

APPLICATION NO. FILING DA	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	02/05/2004	Rafay Khan	N0187US	5973
10/772,810	07\03\1004			

TITLE OF INVENTION: PHOTOGRAPH LOCATION STAMP

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(\$) DUE	DATE DUÉ	
nonprovisional	NO NO	\$1510	\$0	02	\$1510	08/26/2011	
nonprovisionar				1 06/03/2011	MBELETE2 00000000	5 500728 10772810	
EXAN	MNER	ART UNIT	CLASS-SUBCLASS	01 FC:1501	1510.00 DA		
QUIETT, CA	ARRAMAH J	2622	348-376000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 1. Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. 1. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
PLEASE NOTE: Un recordation as set for	iless an assignee is ident th in 37 CFR 3.11. Com	A TO BE PRINTED ON iffed below, no assignee pletion of this form is NO	THE PATENT (print or ty) data will appear on the p of a substitute for filing an	pc) atent. If an assignce is it assignment. I and STATE OR COUNT	dentified below, the doc	ument has been filed for	
(A) NAME OF ASSI	NORTH AMER	RICA, LLC	CHIC	AGO, IL	_		
Please check the approp	riate assignee category o	categories (will not be p	orinted on the patent):	Individual Corporat	ion or other private grow	catity Government	
			4b. Payment of Foc(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. SThe Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 500 728 (enclose an extra copy of this form).				
D a Amalicant clair	atus (from status indicate us SMALL ENTITY stat	us. Sec 37 CFR 1.27.	☐ b. Applicant is no lor	nger claiming SMALL EN	TITY status. See 37 CFR	1.27(g)(2).	
NOTE: The Issue Fee a interest as shown by the	nd Publication Fee (if records of the United St	uired) will not be accept ites Patent and Trademar	ed from anyone other than k Office.	ine applicant; a registered	autorities of agency of the	assigned to death party and	
Authorized Signatur Typed or printed nar	e <u>Adil</u> nc Adil 1	Musch 3		Date	58,728	and TICOTO to Advance in	
This collection of informan application. Confide submitting the complet this form and/or suggest	mation is required by 37 mitality is governed by 3 ed application form to the tions for reducing this but	FR 1311. The informat 5 U.S.C. 122 and 37 CFF e USPTO. Time will var urden, should be sent to to	ion is required to obtain or 2 1.14. This collection is est y depending upon the indi the Chief Information Office CONSTITUTED FORMS	retain a benefit by the pub stimated to take 12 minute vidual case. Any commen cer, U.S. Patent and Trades O THIS ADDRESS, SEN	one which is to file (and is to complete, including is on the amount of time mark Office, U.S. Depart D TO: Commissioner fo	gathering, preparing, and e you require to complete tment of Commerce, P.O. of Patents, P.O. Box 1450	

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND PEES OR COMPL. Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.